File with: lowe Ethics and Cempaign Disclosure Board 510 E. 12th, Ste. 1A Des Moires, lowe 50319 Fay: 514 321 4019





Des Moines, lowe 50319 Fax: 515-281-4073	FOR INSTRUCTION DISCLOSURE	S, SEE BACK OF FORM SUMMARY PAGE		09 APR 24	AM In: 1.2
COMMITTEE NAME (Must be	PORTO DE ON STATEMENT AL CO				AITIU• SO
Washington	yes adam many	074	1	FORM	1
(1)Statewide/Legislative/Judge S (4)County Control Committee (8)	or committed you are reporting for: Rending for Retention Candidate (2	State PAC (3)State Party	tical	DR-2 (Rev. 07/2007)	
11) Local Ballot Issue	y PAC (9)City PAC (10)School Bi	end or Other Political Subdivision (PAC (For Office Vee	
CANDIDATE COMMITTEES	ONLY:				· · · · · · · · · · · · · · · · · · ·
Candidate Name	01	Political Party (if applicable	,		
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Washington lo.	ypenison	District (if Senate or House	<u>"</u>	Audited	
Late reports are subject to possib	te civil and criminal pensities. Purs	uent to lowe Code sections 68B.	32A(7) and	68A.401(3), the	candidate, for a
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(You must continue to	file reports until a DR-3 is filed.)	Accorded Form Dr.43.	which El	artico la hald	s, enter County in
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CAUTION: Sec commercial purp	tion 688.32A(6), prohib lose by any person othe	its the use of information copied from reports and statem or than statutory political committees.	ents for soliciting c	ontributions or for	e ny
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHI TO CANDIDATI (if applicable)	E RECEIVED	✓ IF FOR FUND- RAISER INCOME
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* Disclosure lew requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consequinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / or (for Schedule A)

TOTAL (If lest page of this achedule)

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

Committee	e name (musi be the blue	same as on Statement of Organization) **I Adum Manapla W	ach lo Supervisor	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Diobursamant) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/31/09	CK#	Service charge to Bank		\$ 5.35
2/28/09	CK#	service charge		5.35
3/24/09	ID# CK#	withdrawal to close account	re-pay lan adam put in the to keep allowed open	84.32
	ID#			
	ID# CK#			
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	ID# CK#			
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SUB-TOTAL

TOTAL (If last page of this echedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be invantoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

(for Schedule 8)